

DIABETES IN PICKENS COUNTY

SC Department of Health and Environmental Control

◆ Diabetes Control Program ◆ Chronic Disease Epidemiology Branch
 Diabetes Initiative of South Carolina

Diabetes mellitus, a chronic disease characterized by elevated blood sugar levels, is a significant contributor to morbidity and mortality in South Carolina and throughout the United States. Diabetes can cause debilitating and costly complications such as blindness, renal failure, lower extremity amputations, and cardiovascular disease. Much of the health and economic burden of diabetes can be averted through known prevention measures.

In 1998, 5.7 percent of South Carolina adults, equivalent to approximately 163,000 adults, reported having been diagnosed with diabetes. Diabetes was the sixth leading cause of death in South Carolina claiming 1,029 lives in 1997 and contributing to another 3,014 deaths. This report presents the burden of diabetes in Pickens county.

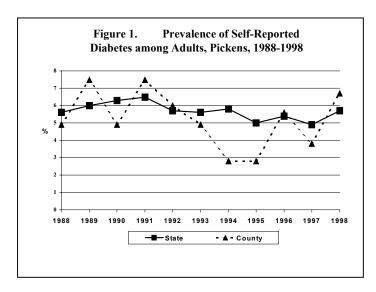
Behavioral Risk Factors

Table 1 displays the prevalence of major behavioral risk factors for diabetes and its complications in Pickens county and SC in 1998.

Table 1. Prevalence (%) of		
Behavioral Risk Factors for Diabetes		
	Pickens County	SC
Overweight	54.7	52.3
Current Smokers	24.9	24.7
Physical Inactivity	64.1	61.6
Consuming fruits and vegetables		
less than 5-A-Day	76.6	78.2
Hypertension (1997)	22.1	26.7
High Cholesterol (199	29.5	24.4

Prevalence

In 1998 there were approximately 5,481 adults (6.7%) aged 18 and older living in Pickens county who have been told by a doctor some time in their life that they have diabetes (Figure 1).



Morbidity and Complications

In 1997, there were 114 hospital discharges with diabetes as the primary diagnosis among Pickens county residents. During the same year, there was an additional 1292 hospital discharges with diabetes-related condition. African-Americans had less hospitalizations for diabetes than whites: 13 (11%) for diabetes as the primary diagnosis and 134 (10%) hospitalizations for diabetes as a related condition.

In 1997, hospital charges for hospitalizations of Pickens county residents having diabetes as primary diagnosis were up to \$903,841 and \$16.2 million for diabetes as a related condition. The total

length of hospital stay for diabetes as the primary diagnosis was 548 days.

Pickens county patients with diabetes who had diabetes-related complications in 1997 included:

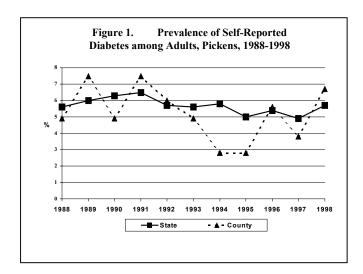
- 53 (3.8%) with renal manifestations;
- 35 (2.5%) with lower extremity amputations related to diabetes;
- 53 (3.8%) with diabetic ketoacidosis;
- 49 (3.5%) with renal failure;
- 50 (3.6%) with dialysis.

Adults with diabetes are at increased risk of developing cardiovascular disease. Out of 1388 hospitalizations for patients with diabetes, 1034 (74%) had cardiovascular diseases, and 147 (10.5%) had stroke.

In 1997, there were 89 emergency room (ER) visits for diabetes as the primary diagnosis, among which 8 (8.9%) were for African-American patients. In addition, there were 267 ER visits for diabetes as a related condition. Total ER charges for diabetes as the primary diagnosis was \$52,425.

Mortality

In 1997, diabetes was listed as the underlying cause of death for 36 residents of Pickens county. This is an age-standardized mortality rate of 28.9 per 100,000 population, lower than the state average of 39.2 per 100,000 population (Figure 2). Diabetes was listed as a contributing cause in 73 deaths in Pickens county; a standardized mortality rate of 55.8 per 100,000 population.



A total of 427 potential years of life were lost in 1997 because people died prematurely from diabetes. Diabetes mortality in Pickens county follows the national pattern of diabetic mortality that African-Americans has higher mortality rates than whites. African-American women had the highest standardized mortality (81.9 per 100,000 population) among all race-sex groups.

Pickens County Resources

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